

PHYSICIANS AND ASCETICS IN JOHN OF EPHESUS: AN EXPEDIENT ALLIANCE*

SUSAN ASHBROOK HARVEY

It is commonly agreed that hagiography has much to tell us about Byzantine health, illness, and medicine.¹ The problem for historians lies in the task itself: that is, how to get at whatever it is that hagiography has to tell us. The present study is, I hope, a suggestion on ways of doing the task. Although a small contribution, perhaps the issues raised here will open larger possibilities.

John of Ephesus is a Syriac writer well known to historians of the sixth-century Byzantine Empire.² A native of Mesopotamia, John's varied career led him to travel widely in the empire of his day, as monk, missionary, bishop, and monophysite spokesman in the imperial court under both Justinian and Justin II. A writer whose zeal exceeds his elegance, John has left us two major works of serious importance for our understanding of the time in which he lived: his *Ecclesiastical History*, extending from Julius Caesar to the late 580s;³ and his

hagiographical collection, the *Lives of the Eastern Saints*, fifty-eight short biographies of monks and nuns he himself knew, written in the late 560s.⁴ By their very nature, histories and saints' Lives concern themselves with differing aspects of people, events, and experiences,⁵ and John, too, perceives his task differently in each of these works. Cautious of the many pitfalls in handling hagiography as an historical source, scholars have turned to John's *Ecclesiastical History* far more quickly and far more often than to his *Lives* in their efforts to untangle the sixth-century empire.

But John's *Lives* have just as much to offer in this regard, particularly in the glimpses they provide us of the daily world in which John lived. Indeed, John's motivation as a writer of both molds is to portray faithfully the experiences of the crisis-ridden populace of his day, especially of the monophysites of the eastern empire. Persecuted by the Chalcedonian government, stricken with the hardships of war, bubonic plague, famine, and earthquakes, these people suffered repeated calamities throughout John's lifetime.⁶ In his effort to be hon-

[The reader is referred to the list of abbreviations at the end of the volume.]

*I am indebted to Dr. Kenneth L. Caneva for his advice and help with sources.

¹E.g., H. J. Magoulias, "The Lives of the Saints as Sources of Data for the History of Byzantine Medicine in the Sixth and Seventh Centuries," *BZ*, 57 (1964), 127–50; E. Patlagean, *Pauvreté économique et pauvreté sociale à Byzance 4^e–7^e siècles* (Paris/La Haye, 1977), 101–12.

²On John of Ephesus see the summary biography in E. Honigsmann, *Évêques et évêchés Monophysites d'Asie antérieure au VI^e siècle*, CSCO Subsidia 2 (Louvain, 1951), 207–15.

³John's *Ecclesiastical History* consists of three parts. Part I, covering from Julius Caesar to the death of Theodosius II has been lost, apart from a few fragments preserved in Michael the Syrian's *Chronicle*. Part II, continuing to 571, survives in fragments; some were collected in J. P. N. Land, *Anecdota Syriaca* (Leiden, 1868), II, 289–330, 385–92. Large sections are preserved in ps.-Dionysius of Tell-Mahre; these are gathered and annotated by F. Nau, "Études sur les parties inédites de la chronique ecclésiastique attribuée à Denys de Tellmahré," and "Analyse de la seconde partie inédite de l'Histoire Ecclésiastique de Jean d'Asie, Patriarche Jacobite de Constantinople," *ROChr*, 2 (1897), 41–68, 455–93. The best text for these fragments is now ed. I.-B.

Chabot, *Incerti Auctoris Chronicon Pseudo-Dionysianum vulgo dictum* II, CSCO 104/53 (Louvain, 1952). More fragments of Part II were edited by E. W. Brooks, *Accedunt Iohannis Ephesini Fragmenta*, also in CSCO 104/53, pp. 402–20. Part III survives almost intact; the best edition is edited and translated by E. W. Brooks, *Iohannis Ephesini Historiae Ecclesiasticae Pars Tertia*, CSCO 105/54 and 106/55 (Paris, 1935–36). On re-dating Part III so that John's death can be placed in 589, see P. Allen, "A New Date for the Last Recorded Events in John of Ephesus' *Historia Ecclesiastica*," *Orientalia Lovaniensia Periodica*, 10 (1979), 251–54.

⁴John of Ephesus, *Lives of the Eastern Saints*, ed. and trans. E. W. Brooks, PO 17–19 (Paris 1923–25).

⁵Cf., e.g., H. Delehay, *The Legends of the Saints*, trans. D. Attwater (New York, 1962); E. Patlagean, "A Byzance: ancienne hagiographie et histoire sociale," *Annales: écon. soc. civ.*, 23 (1968), 106–26; P. Brown, "The Rise and Function of the Holy Man in Late Antiquity," *JRS*, 61 (1971), 80–101.

⁶For a survey of this situation see S. Ashbrook, "Asceticism in Adversity: An Early Byzantine Experience," *BMGS*, 6 (1980), 1–11.

est to their experiences, John writes his hagiographical collection—as much a celebration of holy presence in the midst of human suffering as it is an exhortation to hearten a battered people. The results of his efforts are sometimes surprising.

Tucked away in the *Lives of the Eastern Saints*, there is a brief but striking account of one of John's co-workers, the presbyter Aaron.⁷ An Armenian by birth, and an ascetic since his youth, Aaron had long excelled both physically and spiritually in the taxing labors of his chosen vocation. John of Ephesus lived and worked with Aaron for thirty years, sometimes in the exile suffered by the eastern monastic community, but mostly working together in the monophysite settlements and refugee camps of Constantinople. Aaron distinguished himself by the severity of his ascetic practices, and also by the vigor with which he performed the menial tasks of the monasteries where he lived and the care he exerted for those in need. Admirable, then, on these two accounts—private and public labors for God—Aaron fulfilled the ascetic model dearest to John's own heart.⁸ However, the remarkable point of Aaron's story lies not in what John tells us he did, but in what John tells us Aaron survived. Here is John's account:

Once [Aaron] fell under a serious disease of gangrene in his loins; and he bore this affliction with great discretion, until his loin was eaten up and mutilated and had vanished down to its root, and his disease began to enter his inner organs. But seeing that he was afflicted by a harsh malady and was cruelly rent in private, we besought him to tell what his illness was. But he for his part, until his wound had worsened severely, held fast—constant in prayer and filling his mouth with praise and thanksgiving to God. Finally, when he could no longer pass water he was forced and so persuaded to reveal and make known his disease. Then the whole of his loin was found eaten away and consumed, so that the physicians contrived to make a tube of lead (*'abūbta' d'abārā'*) and placed it for the passing of his water, while also applying bandages and drugs to him. And so the ulcer was healed. Furthermore, Aaron lived eighteen years after the crisis of this test, praising God, and having that lead tube in place for the necessity of passing water.⁹

A compelling tale, indeed! But if one's heart goes out to Aaron for what he endured, one's mind sa-

lutes the ingenuity and skill of the physicians involved. These, to be sure, displayed their art at its best—something we see all too rarely in our ancient sources.¹⁰ Their efforts were in keeping with the fullest medical knowledge of their times, a factor not to be divorced, surely, from the setting of the incident in Constantinople. Gangrene was a common, and commonly horrifying, problem;¹¹ and not least amongst ascetics, whose lifestyles often invited the danger.¹² The technique of surgically removing only the dead tissue was well known.¹³ The problem in Aaron's case would be the healing of an area so widely ulcerated: gangrene in the genitals was the most serious of this type of infection.¹⁴ Indeed, it is this accomplishment in Aaron's situation that is most impressive. The surgical procedures involved were within the competence of the time: the excision of the diseased flesh, as noted, and the use of tubing for the removal of bodily waste, a technique employed in relieving the buildup of pus or other fluids in various parts of the body,¹⁵ but also practised in cases of complete castration—a circumstance perhaps more relevant.¹⁶ Aaron's emasculation by disease presented its gravest challenge by the extent of infection involved.¹⁷ That he lived not only to tell the tale, but to tell it for eighteen more years is high tribute to the work of these doctors.

But the most striking element of Aaron's experience is not the illness or its cure, although we gain here more data for substantiating the state of medical skill in the early Byzantine Empire. It is not the content of this passage, but its context that is so surprising. For John's manner of telling the incident is markedly discordant with hagiographical style and form. This holy man, as John tells the

¹⁰See Magoulas, "Lives of the Saints"; cf. G. Majno, *The Healing Hand: Man and Wound in the Ancient World* (Cambridge, Mass., 1975), 395–422 on Galen and his legacy.

¹¹Majno, *op. cit.*, 4–6.

¹²Patlagean, *Pauvreté*, 106.

¹³Majno, *op. cit.*, 191–92; L. H. Toledo-Pereya, "Galen's Contribution to Surgery," *JHM*, 28 (1973), 357–75, esp. at 366–67; L. J. Bliquez, "The Tools of Asclepius: The Surgical Gear of the Greeks and Romans," *Veterinary Surgery*, 2.iv (Oct.-Dec. 1982), 150–57, esp. at 155.

¹⁴D. Brothwell and A. T. Sandison, *Diseases in Antiquity: A Survey of Diseases, Injuries and Surgery of Early Populations* (Springfield, Ill., 1967), 241, 515.

¹⁵Majno, *op. cit.*, 156–58; cf. Toledo-Pereya, *art. cit.*, 371–74, and L. J. Bliquez, *art. cit.*, 156–57.

¹⁶Majno, *op. cit.*, 253–54; Brothwell and Sandison, *op. cit.*, 514–15; and cf. N. M. Penzer, *The Harem* (Philadelphia, 1937), 140–44.

¹⁷Majno, *op. cit.*, 183–88; 417–20.

⁷Jo. Eph., *Lives*, 38 (PO 18, pp. 641–45).

⁸Cf. S. Ashbrook Harvey, "The Politicisation of the Byzantine Saint," *The Byzantine Saint*, ed. S. Hackel, *Studies Supplementary to Sobornost* 5 (1981), 37–43; and *idem*, *Asceticism and Society in the Sixth Century Byzantine East* (forthcoming).

⁹Jo. Eph., *Lives*, 38 (PO 18, pp. 643–44); my translation.

story, suffers a fully human illness and a fully human cure. Physicians are summoned, rather than saints living (e.g., a priest-physician) or saints dead (as the miracle healers Cosmas and Damian); and the physicians are effective not because of divine intervention, of which John makes no mention, but because of their own expertise. Moreover, the story is told without allegorical or moralizing embellishment. It is altogether a most curious account to be found in hagiography.

To see the peculiarities of John's method, we need only compare Aaron's story with parallel passages in other hagiographical collections of the same genre—Palladius' *Lausiaca History*, Theodoret of Cyrrhus' *Historia Religiosa*, and John Moschus' *Pratum Spirituale*.¹⁸ The contrasts are at once clear, and on various levels.

It is apparent that Aaron himself did not share John's attitude toward his illness. John tells us that Aaron accepted the infection without acknowledging its presence to others; despite his suffering, Aaron was "constant in prayer, filling his mouth with praise and thanksgiving for God." Although John was aware that Aaron was ill, he was unable to extract any information on Aaron's condition for a long time, until the disease had progressed to a critical state.

Aaron's attitude was common amongst ascetics of late antiquity. The care of others was a significant part of the ascetic's career, particularly care for the sick. In hospitals as trained physicians,¹⁹ in hospices as lay nurses,²⁰ and above all in their own sanctuaries as miracle workers,²¹ the holy men and

women of late antiquity reenacted Christ's ministry to the afflicted with various efficacious skills.²² Some ministered with medical training from the Christianized Galenic teaching, some by the folk wisdom of herbal lore, some by common sense and cooperative arrangement with hospital establishments. But in each case the treatment was given with the added aura for all concerned of healing by holy hands.²³ However, the ascetic's care for the illnesses of others was precisely that; rarely would holy men or women, however sick, allow themselves medical treatment.

Nor was the attitude surprising. To the ascetic, illness was simply one more form of suffering to endure in the imitation of Christ.²⁴ Indeed, illness worked for the ascetic as another means of bodily discipline, not unlike the severe physical exertion of ascetic exercises. Palladius had once chastised Dorotheus for his harsh treatment of his body—to which the Egyptian anchorite had flatly replied, "[My body] kills me, I will kill it."²⁵ But when Palladius found the hermit Benjamin gravely ill with excessive swelling, he found exactly the same attitude: "Pray, my children, that the inner man may not contract dropsy; for this body did not help me when it was well, nor has it caused me harm when faring badly."²⁶ Indeed, Benjamin continued healing others while his own condition worsened, until he died eight months later. John Moschus records a similar view. The Palestinian anchorite Barnabas, refusing treatment for an infected foot, declared, "As much as a man suffers outside, so much does he bloom within."²⁷

The ascetic's suffering of illness was a means both of discipline by endurance and of carrying out the literal symbolism characteristic of early Christian asceticism: to suffer an illness without treatment while carrying on with one's daily activities was to deny the physical for the spiritual, to declare one's commitment to the divine by divorcing oneself from the temporal realm. It was a virtual requirement on the part of the ascetic, even as the heal-

¹⁸ Palladius, *Historia Lausiaca*, ed. and trans. C. Butler, *The Lausiaca History of Palladius* (Cambridge, 1898–1904) 2 Vols.; English trans. by R. T. Meyer, *Ancient Christian Writers* 34 (London, 1965). Theodoret of Cyrrhus, *Historia Religiosa*, ed. and tr. P. Canivet and A. Leroy-Molinghen, *Théodore de Cyr, Histoire des moines de Syrie*, SC 234 and 257 (Paris 1977–79). John Moschus, *Pratum Spirituale*, ed. J.-P. Migne, PG 87, iii, cols. 2851–3112; trans. M.-J. Rouët de Journel, Jean Moschus, *Le Pré Spirituel*, SC (Paris, 1946).

¹⁹ Cf. D. J. Constantelos, *Byzantine Philanthropy and Social Welfare* (Rutgers, 1968), 152–84 for the general setting. The first notable effort of this kind was the welfare complex established by Basil of Caesarea in the 370s, consisting of a poor house, hostel, and hospital noted especially for its treatment of leprosy. The complex also served as headquarters for the distribution of wealth and possessions bequeathed to the church for use among the needy. Gregory of Nazianzus, *Or.* XLIII, 63 (where he describes the complex as a "new city"); Basil of Caesarea, *Ep.* 94, and 142–154; Sozomen, *HE*, VI, 34.

²⁰ Majno, *The Healing Hand*, 393–94; Constantelos, *op. cit.*, 185 ff. Cf. John of Ephesus, *Lives*, 12, 33, 45, 46.

²¹ E.g., Magoulias, "Lives of the Saints"; and cf. Theodoret, *HR*, 6, 9, 11, 13, 16, 21, 26; Jo. Eph., *Lives*, 2, 3, 4, 6, 26, 35; John Moschus, *Pratum*, 28, 56, 206.

²² H. E. Sigerist, *Civilization and Disease* (New York, 1944), 69 ff.

²³ *Ibid.*, 131–47; D. J. Constantelos, "Physician-Priests in the Medieval Greek Church," *Greek Orthodox Theological Review*, 12 (1966–67), 141–53.

²⁴ Sigerist, *op. cit.*, 69 ff.

²⁵ Palladius, *HL*, 2 (trans. Meyer, 33); cf. the awesome Macarius of Alexandria, *Pall.*, *HL*, 18.

²⁶ *Pall.*, *HL*, 12 (trans. Meyer, 48); cf. John Moschus, *Pratum*, 8.

²⁷ Jo. Mos., *Pratum*, 10 (my trans.).

ing of the lay populace was itself a requirement.

Such a perspective on sickness allowed the perception of ascetic suffering a further development as a source of literary imagery. The metaphorical dimensions of illness provided the hagiographer a wealth of parallels with which to play off the spiritual and physical health of the ascetic. Soul and body mirrored one another, but, as noted in the passages just cited, they did so in reverse: bodily health indicated sickness of soul, bodily disease spiritual well-being, in a direct quantitative relation—the more of one, the greater the other.²⁸ It was but a short step from this relationship to its moralistic counterpart.

The body represented the soul's demise, because it tempted the ascetic with desire. The early Church's ambiguous and indecisive stance regarding castration in pursuit of Christian perfection indicates the uncertainty that prevailed as to what physical longing was about. If desire was the symbol of evil, and of the evil of the material world as a whole, then castration was to be valued as a means of severing oneself altogether from a life of sin—a view most comfortable in gnostic circles. But if sin is the result of human weakness rather than the product of an evil creation, then celibacy rather than castration proves the higher virtue: Adam's sin was an act of will, and so to be corrected by such. The mitigating moderation of the latter, orthodox view did not, however, override the tenacity with which popular Christianity clung to dualistic ideas.²⁹ The dilemma about castration survives hagiographically for centuries, long after the practice itself was condemned by the mainstream church.

At its most allegorical level, castration in hagiography happens "spiritually"—that is, in a vision. So Palladius and John Moschus speak of instances where holy men who are counsellors to women are unable to bear the temptation they suffer. In both cases their "cure" is worked in a dream, and heals

them as completely as if it were physical.³⁰ But the mysticism of these incidents is played out more luridly by both writers through the metaphor of bodily illness as a sign of spiritual health. Both tell of holy men unable to withstand the temptation of desire, who seek relief in sexual promiscuity. In Palladius' story of Heron, this sinful ascetic suffers a severe ulceration that causes the loss of his genitals, and so brings salvation to the monk ("unwillingly," we are told), who returns to the ascetic life thus cleansed.³¹ Moschus' account, similarly, describes how the fallen monk in question was covered by leprosy as soon as he entered a brothel, and thence returned to his monastery praising God for sending illness to his body in order to save his soul.³² The stories in fact are thematic to hagiography.³³

In these instances, disease represents a thinly disguised metaphor for sin; if the disease of the soul can be transferred to the body, itself the source of sin, salvation is possible. Further, the condition of sin is reduced, as so often in early Christian literature, to the question of sexuality. And if the mainstream Church would not allow the radical cure of castration, then the Divine Physician himself would accomplish it through disease. The conflation of body, sexuality, and sin is inextricably worked into the mind-set of late antiquity, despite the protests of theologians (like John Chrysostom) to the contrary.³⁴ Against such a backdrop, John of Ephesus' story about Aaron stands out starkly on two accounts: first, because although emasculation by disease becomes a *topos* in hagiography to escape its otherwise heretical connotations, John presents us with its occurrence in real rather than thematic terms. The illness happens, but no hint of allegorical overtone is read into the event; Aaron's ascetic career hides no skeletons in its closet. Secondly, John's concern is that Aaron's sickness be healed. He does not follow the pattern of using illness of the body to heal the illness of the soul.

Where Palladius and John Moschus present ill-

²⁸ As an example, consider the impassioned speech by John the Nazarite in Jo. Eph., *Lives*, 3 (PO 17, at pp. 51–53).

²⁹ Cf. E. Patlagean, "L'Histoire de la femme déguisée en moine et l'évolution de la sainteté féminine à Byzance," *StM*, 17 (1976), 597–623, at pp. 610–11; Penzer, *The Harem*, 135–40. Cyril of Skythopolis noted the general alarm about the presence of eunuchs in Palestinian monasteries: *Vita Euth.*, 16, 31; *Vita Saba*, 7, 29, 69; *Vita Kyr.*, 4. Compare the similar attitude in Egypt, as discussed in D. Chitty, *The Desert a City* (Oxford, 1966; repr. London, 1977), 66–67; and in the Syrian Orient in A. Vööbus, *History of Asceticism in the Syrian Orient II*, CSCO 197/Sub. 17 (Louvain, 1958), 257. On the body as the source of sin, see in general J. Bugge, *Virginitas: An Essay in the History of a Medieval Ideal* (The Hague, 1975).

³⁰ Pall., *HL*, 29; Jo. Mos., *Pratum*, 3.

³¹ Pall., *HL*, 26.

³² Jo. Mos., *Pratum*, 14.

³³ Patlagean, *Pauvreté*, 106.

³⁴ E.g., Bugge, *op. cit.*; but especially Patlagean, *Pauvreté*, 113–55; *idem*, "La femme déguisée"; *idem*, "Sur la limitation de la fécondité dans la haute époque byzantine," *Annales: écon. soc. civ.*, 24 (1969), 1353–69 (= "Birth Control in the Early Byzantine Empire," in *Biology of Man in History*, ed. R. Forster and O. Ranum [Baltimore, 1975], 1–22). Cf. W. D. Hand, "Deformity, Disease, and Physical Ailment as Divine Retribution," *Festschrift Mattias Zender: Studien Volkskultur, Sprache und Landesgeschichte*, ed. E. Ennen and G. Wiegmann (Bonn, 1975) I, 519–25.

ness in an ascetic as a means of spiritual and moral testing, Theodoret of Cyrrhus views it more as an instrument of spiritual instruction.³⁵ In the cases of the paramount holy men Julian Saba and Symeon the Stylite, Theodoret tells us they suffered serious illness or infection so that people would realize they, too, were human. Disease was proof that these living martyrs of the flesh were not spiritual beings in the form of men, and thus not to be worshipped as such.³⁶

But if Theodoret gives the sense that illness in the ascetic serves an admonitory purpose for the public, he implies, too, that illness serves the ascetic in similar manner—to warn the holy man or woman against hubris, excessive spiritual pride. For Theodoret there is divine purpose in illness, not in the sense of moral chastisement for the body's sinful nature, but for the use or necessity of deepening our awareness of the relation between the human and the divine. Theodoret perceives these realms as separated by an insurmountable gulf, crossed only by the will of divine grace. Illness in an ascetic provides a framework in which the mystery of that grace is witnessed. Theodoret's personal involvement in what he describes underscores his point. As bishop of Cyrrhus, he assumes responsibility for the ascetics of his region—not in the sense of spiritual mentor, but as a kind of attendant overseer, keeping watch that all is well and looking out for problems. In this capacity, Theodoret wields his ecclesiastical authority out of duty, while viewing the ascetics themselves as persons of holy vocation whose spiritual authority exceeds his own. Illness is a place where the interconnection of grace, authority, and spirituality is found. In the case of infection, ill health, or sickness, Theodoret will intervene with an ascetic's practice, at least to the extent that the holy one allows some acquiescence to the affliction: nursing by Theodoret himself, or a lightening of ascetic exercises for the duration of the problem.³⁷

But Theodoret's concern that the ascetic should not suffer sickness and the dangers of infection—matters beyond the ascetic's capacity for regulation—is not the end of these stories. Having described the illness, the ascetic's suffering, and his

own compassionate involvement, he bears witness that these holy ones effect their own cures miraculously. The human lesson having been learned, and appropriate humility summoned, the divine is suddenly manifest in the ascetic's healing, wrought by prayer and the sign of the cross. The very locus which reveals human weakness becomes the place where God's grace is displayed: the ascetic's body is the point where human and divine intersect. The metaphorical parallel to the mystery of the incarnation is not far off.

Here again, in the fundamental understanding of illness, the contrasts between John of Ephesus and Theodoret are greater than the similarities. Like Theodoret, John is an ecclesiastical leader whose duties involve overseeing the general welfare of ascetics. Throughout his career, John felt compelled to intercede with an ascetic's practice if issues of physical health were involved. He invariably appears as the voice of moderation when confronting the harshness of the Syrian ascetic's traditional activities.³⁸ Nonetheless, John's narrations of such episodes are once again devoid of didactic undertones, even of the kind Theodoret interjects. So, for example, John describes his alarm at the occurrence of sickness in ascetics, and particularly of untended sores.³⁹ Festering ulcerations of the skin were common amongst holy men and women, the product of their obsessive lack of hygiene, made worse by the indifference to personal attention that characterized the ascetic lifestyle.

John's descriptions of these episodes are uneasy. The ascetic's suffering and endurance are duly acknowledged, but when John or others sharing his views are ineffectual in urging that proper care be taken, his frustration, too, is apparent. The message in these accounts holds no moral or spiritual allegory; John draws no divine purpose into his telling of these occasions. Instead, his attention in each case is focused on how the illness or infection affects the ascetic's work. His concerns are pragmatic. He offers no packaging here of divine control, or purpose to the situation; these are problems to be dealt with commonsensically. The ascetics carry on, with or without attending to their infirmities; no miracles are wrought to wipe away their discomfort or sickness. If, as in the case of Aaron, the situation becomes critical, John's practicality is rapidly employed: medically knowledgeable and

³⁵ Cf. A. Adnes and P. Canivet, "Guérisons miraculeuses et exorcismes dans l'Histoire Philothée de Théodoret de Cyr," *RHR*, 171 (1967), 53–82, 149–79.

³⁶ *Theo.*, *HR*, 2, 26.

³⁷ *Esp. HR*, 21, 22, 24; cf. 26.

³⁸ *Jo. Eph.*, *Lives*, *passim*.

³⁹ *E.g.*, *Lives*, 12, 13, 21, 27.

skilled practitioners are summoned. If there is any moral to John's depiction of illness for the ascetic, it is in his reminder that the commandment charges us to love not only our neighbour, but ourselves also.⁴⁰ His story of Aaron, then, is consistent with the attitude towards illness and its requirements that John displays throughout the *Lives of the Eastern Saints*.

But what is this attitude? If the story as it stands were a part of John's *Ecclesiastical History*, there would be nothing surprising (though perhaps something heartening) in his account. But as we have seen, when comparable situations are found in hagiography similar to John's, literary protocol reigns supreme. If the healing is described at all; if, indeed, the healing is allowed, it happens by the holy hands of a saint, in person or in a vision, and in all events miraculously. Further, description of this type of gangrene and its consequent effects on the body's organs ought to be portrayed with the symbolic admonishment implied. John tells Aaron's story with no such adornment and without stylization, and he tells it in his *Lives of the Eastern Saints* rather than elsewhere.

In looking at parallel accounts, we have gained some sense of the understanding of illness for various hagiographers. It is clear that the use of hagiography for the study of medicine must depend upon ascertaining the hagiographer's own perception of illness and health in terms of the individual's spiritual well-being. But our comparisons have shown up no ulterior religious design to John of Ephesus' portrayal of disease and its appropriate treatment. What, then, does this curious paradox of content and context tell us about John?

We must return to John himself. John was a monophysite, at the very time when the dispute over Chalcedonian orthodoxy was splitting into a framework of two distinct and independent churches, each viewing the other as heretical.⁴¹ Himself from Mesopotamia, John writes in the *Lives* primarily of his compatriots from the predominantly monophysite eastern provinces, though often, as in Aaron's case, persecutions have forced these people into exile elsewhere. John's "saints" are for the most part otherwise unknown to us. He writes about ascetics whose works have been of special meaning for their communities; celebrities

of the day are only occasionally included. John's selection is instructive. His people suffered relentlessly ongoing tragedy during the sixth century: violent if sporadic persecutions, war against Persia, chronic famine and blight, the Great Bubonic Plague and its lingering aftermath. The "saints" John commemorates are not solitaries in the wilderness, separated from this suffering world. They are those who worked their ministry and service within it, manifesting the grace of holy presence in the midst of continual calamity.

It was not a world that encouraged an unrealistic attitude, especially amongst the monophysites.⁴² Survival both physical and spiritual was of critical import. Although their language and thought relies heavily on the miraculous,⁴³ these people have not seen much of miracles in the glorious sense. Nor, although they see a great deal of divine wrath in the events of their times,⁴⁴ do they see much clear correlation between sin and divine retribution. The suffering of the monophysites, those of the true faith, evoked instead the re-charged imagery of the martyr's crown. Nonetheless, as John's *Lives* proclaim, these people have seen something of the holy, and they have seen it amongst themselves, through the work of the ascetics John glorifies.

For John is truly a monophysite.⁴⁵ He understands no division between the human and divine realms: the unity of Christ human and divine meant a unity of God's presence and action in His created world. Ever pragmatic, John has his own understanding of what that means, as Aaron's story shows. Indeed, the key to Aaron's story lies in the result of the action taken: Aaron lived *and worked* another eighteen years after "the crisis of this test." Aaron's work is the real issue. Aaron is a holy man: he is how the divine is present in the midst of such unholy times. Throughout the *Lives of the Eastern Saints*, John shows little interest in supernatural miracles, little concern for didactic moralizing (either on his own part or on that of his subjects), and little time for sugarcoated portraits. There is much that needs

⁴⁰ E.g., *Lives*, 11, 12, 13, 21, 36.

⁴¹ Honigsmann, *Evêques et évêchés*; W. A. Wigram, *The Separation of the Monophysites* (London, 1923; repr. New York, 1978).

⁴² The *Plerophories* of John Rufus were written in 512, at the height of monophysite ascendancy; they reflect that optimism. John Rufus, *Plérôphories, témoignages et révélations contre le Concile de Chalcédoine*, ed. and tr. F. Nau, PO 8 (1912), 5–208.

⁴³ Cf. N. Baynes, "The Thought-World of the East Roman Empire," *Byzantine Studies and Other Essays* (London, 1955), 24–47.

⁴⁴ Cf. A. A. Vasiliev, "Medieval Ideas of the End of the World: East and West," *Byzantion*, 16 (1944), 462–502.

⁴⁵ See esp. J. Lebon, *Le Monophysisme Sévérien* (Louvain, 1909); and Wigram, *op. cit.*

doing, and those who can do God's work are preciously vital. For Aaron, as for others, John shows a thorough expediency: there is no time, in the midst of such hardship, for anything less honest. John's alliance with doctors is born of necessity—as he would be the first to admit. And so it happens

that there is one hagiographer who reveals to us not simply the thought-world of his time, but something of its reality as well.

University of Rochester